

7-11-2008

RECEIVED

FROM: Kevin BURTON
AUG 22 2008
RICHARD W. WIEKING
CLERK U.S. DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

COURT CASE # CV-07-4967 PSH (PR)

USJN ID# C-38062

U.S. Department of Justice, United States Marshals
Service.

Re: Location or Info on Individual(s) to be
served, order AND complaint, In Re: KEVIN BURTON
Plaintiff, vs. Defendant, California Department of Corrections,
et al.

TO: Attorney or Originator, Felicia Beloba,
In order to locate the Individual(s) on
USM-285 forms. ON space, ON mentioned
form, "Special Instructions or other information
that will assist in expediting service",

I have provided additional information, to
help locate Individual(s) and hopefully help
expedit service of summons order, & complaint.

I have included information, with some attachments
that might be of assistance.

I Thank you for your time.

Kevin Burton
7-11-2008.

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF Kevin Burton	COURT CASE NUMBER CV-07-4967 PJH (PR)
DEFENDANT California Department of Corrections, et al.	TYPE OF PROCESS Summons Order and Complaint

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
SERVE AT { Correctional Officer Wilson Transferred to Corcoran State Prison
 ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
Salinas Valley State Prison, P.O. Box 1020, Soledad, CA 93960 Employed at SATF Corcoran, CA 93212

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	Number of process to be served with this Form 285	3
Kevin Burton, C-38062 R.J. Donovan State Prison P.O. Box 779007 San Diego, CA 92179	Number of parties to be served in this case	19
	Check for service on U.S.A.	

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold
 Correctional Officer Wilson, Is now employed at S.A.T.F.
 Corcoran State Prison
 P.O. Box 5242
 Corcoran, CA 93212

RECEIVED
 UNITED STATES MARSHAL
 NORTHERN DISTRICT
 OF CALIFORNIA
 JUN 11 AM 10:12
 DATE 6/10/07

Signature of Attorney other Originator requesting service on behalf of Felicia Reloba	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 415-522-2000	DATE 6/10/07
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SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process <u>1</u>	District of Origin No. <u>11</u>	District to Serve No. <u>11</u>	Signature of Authorized USMS Deputy or Clerk <u>R. Juan</u>	Date <u>6/3/08</u>
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I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)	<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode
Address (complete only different than shown above)	Date _____ Time _____ <input type="checkbox"/> am <input type="checkbox"/> pm
Signature of U.S. Marshal or Deputy	

Service Fee	Total Mileage Charges including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)
					\$0.00

REMARKS: 7/1/08 - contacted Lit. Coordinator at SVSP
7/3/08 - Two officers with same last name - need more info, such as 1st name

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF Kevin Burton	COURT CASE NUMBER CV-07-4967 PJH (PR)
DEFENDANT California Department of Corrections, et al.	TYPE OF PROCESS Summons Order and Complaint
NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN SERVE AT Correctional Officer Carrasco CARRASCO ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) Salinas Valley State Prison, P.O. Box 1020, Soledad, CA 93960	

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

Kevin Burton, C-38062
R.J. Donovan State Prison
P.O. Box 779007
San Diego, CA 92179

Number of process to be served with this Form 285

3

Number of parties to be served in this case

19

Check for service on U.S.A.

RECEIVED
UNITED STATES MARSHAL
FOLD
NORTHERN DISTRICT
OF CALIFORNIA
08 JUN 11 AM 10:11

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Attentive Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

THIS Correctional Officer's correct spelling of last name is CARRASCO. WAS EMPLOYED AT S.V.S.P. IN JAN, 2005 AND SPECIFICALLY WORKED IN S.V.S.P. ADMINISTRATION SEGREGATION UNIT, FACILITY D. UNIT 8. ON OR AROUND THE PERIOD OF JAN 11, 2005 JAN 18, 2005.

Signature of Attorney other Originator requesting service on behalf of:

☒ PLAINTIFF☐ DEFENDANT

TELEPHONE NUMBER

415-522-2000

DATE

6/10/07

Felicia Reloba

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process <u>1</u>	District of Origin No. <u>11</u>	District to Serve No. <u>11</u>	Signature of Authorized USMS Deputy or Clerk <i>R. Garcia</i>	Date <i>6/30/08</i>
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I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion then residing in defendant's usual place of abode

Address (complete only different than shown above)

Date _____ Time _____
☐ am
☐ pm

Signature of U.S. Marshal or Deputy

Service Fee	Total Mileage Charges including endeavors	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*) \$0.00
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REMARKS: 7/1/08 - contacted Lit. Coordinator @ SVSP

7/3/08 - Retro 2/c; No officer - Name of this name - Need First & Last name

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF
Kevin BurtonCOURT CASE NUMBER
CV-07-4967 PJH (PR)

DEFENDANT

California Department of Corrections, et al.

TYPE OF PROCESS
Summons Order and Complaint

SERVE AT NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
correctional officer Garcia
 ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
 Salinas Valley State Prison, P.O. Box 1020, Soledad, CA 93960

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

Kevin Burton, C-38062
 R.J. Donovan State Prison
 P.O. Box 779007
 San Diego, CA 92179

Number of process to be served with this Form 285

3

Number of parties to be served in this case

19

Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold THIS CORRECTIONAL OFFICER GARCIA WAS EMPLOYED AT S.V.S.P. ON OR AROUND JAN 11, 2005. AND SPECIFICALLY WORKED IN S.V.S.P. ADMINISTRATION SEGREGATION UNIT, FACILITY D. UNIT 8. ON OR AROUND THE PERIOD JAN 11, 2005. JAN 18, 2005.

RECEIVED
 UNITED STATES MARSHAL
 FOLD
 AUG 11 AM 10:13
 NORTHERN DISTRICT
 OF CALIFORNIA

Signature of Attorney other Originator requesting service on behalf of:

☒ PLAINTIFF☐ DEFENDANT

TELEPHONE NUMBER

415-522-2000

DATE

6/10/07

Felicia Reloba

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated.
 (Sign only for USM 285 if more than one USM 285 is submitted)

Total Process

1

District of Origin

No. 11

District to Serve

No. 11

Signature of Authorized USMS Deputy or Clerk

R. Jan

Date

6/30/08

I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion then residing in defendant's usual place of abode

Address (complete only different than shown above)

Date

Time

☐ am
☐ pm

Signature of U.S. Marshal or Deputy

Service Fee

Total Mileage Charges including endeavors)

Forwarding Fee

Total Charges

Advance Deposits

Amount owed to U.S. Marshal* or (Amount of Refund*)

\$0.00

REMARKS: 7/1/08 - Contacted Lit. Coordinator At SVSP

7/3/08 - 21 officers w/ same last name - need more info

PRINT 5 COPIES:

1. CLERK OF THE COURT

2. USMS RECORD

3. NOTICE OF SERVICE

4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.

5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

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U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF Kevin Burton	COURT CASE NUMBER CV-07-4967 PJH (PR)
DEFENDANT California Department of Corrections, et al.	TYPE OF PROCESS Summons Order and Complaint

SERVE AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN Correctional Officer Perez
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) Salinas Valley State Prison, P.O. Box 1020, Soledad, CA 93960

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW Kevin Burton, C-38062 R.J. Donovan State Prison P.O. Box 779007 San Diego, CA 92179	Number of process to be served with this Form 285 3
	Number of parties to be served in this case 19
	Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold This Correctional Officer, Perez, was employed at S.V.S.P. on or around JAN 11, 2005. And specifically worked in S.V.S.P. Administration Segregation Unit, Facility D. Unit 8. on or around the period of JAN 11, 2005. JAN 18, 2005.

RECEIVED
UNITED STATES MARSHAL
JUN 11 AM 10:13
NORTHERN DISTRICT
OF CALIFORNIA

Signature of Attorney other Originator requesting service on behalf of: Felicia Reloba	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 415-522-2000	DATE 6/10/07
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SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 11	District to Serve No. 11	Signature of Authorized USMS Deputy or Clerk <i>[Signature]</i>	Date 6/30/05
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I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)	<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode
Address (complete only different than shown above)	Date Time <input type="checkbox"/> am <input type="checkbox"/> pm
Signature of U.S. Marshal or Deputy	

Service Fee	Total Mileage Charges including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*) \$0.00
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REMARKS: 7/1/08, Contacted Lit. Coordinator At SP

7/2/08 - 8 officers w/ same last name - Need more info

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
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5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

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U.S. Department of Justice
United States Marshals ServicePROCESS RECEIPT AND RETURN
See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF Kevin Burton	COURT CASE NUMBER CV-07-4967 PJH (PR)
DEFENDANT California Department of Corrections, et al.	TYPE OF PROCESS Summons Order and Complaint

SERVE AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN MTA GARCIA
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) Salinas Valley State Prison, P.O. Box 1020, Soledad, CA 93960

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

Kevin Burton, C-38062
R.J. Donovan State Prison
P.O. Box 779007
San Diego, CA 92179

Number of process to be served with this Form 285

3

Number of parties to be served in this case

19

Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold MTA GARCIA WAS PREVIOUSLY ISSUED (SERVED) SUMMONS ORDER AND COMPLAINT ON MARCH 26, 2007. AND AN ACKNOWLEDGMENT OF RECEIPT WAS SIGNED BY PERSON, ON BEHALF OF ANOTHER PERSON. FILED IN STATE COURT (WITH SAME DEFENDANTS) AS PRESENT, FEDERAL CIVIL CASE AS ABOVE PLEASE SEE ATTACHED "ACKNOWLEDGMENT OF RECEIPT."

Signature of Attorney other Originator requesting service on behalf of:

☒ PLAINTIFF☐ DEFENDANT

TELEPHONE NUMBER

415-522-2000

DATE

6/10/07

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY—DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process <u>1</u>	District of Origin No. <u>11</u>	District to Serve No. <u>11</u>	Signature of Authorized USMS Deputy or Clerk <u>R. J. Jones</u>	Date <u>6/10/07</u>
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I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion then residing in defendant's usual place of abode

Address (complete only different than shown above)

Date

Time

☐ am
☐ pm

Signature of U.S. Marshal or Deputy

Service Fee	Total Mileage Charges including endeavors	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)
					\$0.00

REMARKS: 7/1/08 - contacted Lit. Coordinator At 2 VAP

7/2/08 - 4 MTAs with same last name, need more info such as 1st name

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): Steven C. Sanders Sanders & Associates 3960 Industrial Blvd., #100 3960 Industrial Blvd., Ste 100 West Sacramento, CA 95691 TELEPHONE NO.: (916) 376-8738 FAX NO. (Optional): 916-376-8738 E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name): Kevin Burton		FOR COURT USE ONLY FILED APR 16 2007 LISA M. GALDOS CLERK OF THE SUPERIOR COURT DEPUTY J. NICHOLSON	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Monterey STREET ADDRESS: 240 Church St., Suite 218 MAILING ADDRESS: Monterey County Superior Court 1200 Agujito Road CITY AND ZIP CODE: Salinas, CA 93901 Monterey, Ca 93940 BRANCH NAME:			
PLAINTIFF/PETITIONER: Kevin Burton DEFENDANT/RESPONDENT: CDCR, et al.		CASE NUMBER: M82071	
PROOF OF SERVICE OF SUMMONS		Ref. No. or File No.:	

(Separate proof of service is required for each party served.)

1. At the time of service I was at least 18 years of age and not a party to this action.
2. I served copies of:
 - a. ☒ summons
 - b. ☒ complaint
 - c. ☒ Alternative Dispute Resolution (ADR) package
 - d. ☐ Civil Case Cover Sheet (served in complex cases only)
 - e. ☐ cross-complaint
 - f. ☒ other (specify documents): Case Management Notice; Blank Request to Vacate or Continue Initial Case Management Conference and Order
3. a. Party served (specify name of party as shown on documents served): MTA Garcia
- b. ☐ Person (other than the party in item 3a) served on behalf of an entity or as an authorized agent (and not a person under item 5b on whom substituted service was made) (specify name and relationship to the party named in item 3a):
4. Address where the party was served: Department of Justice, 455 Golden Gate Avenue, Suite 11000, San Francisco, CA 94102-3664
5. I served the party (check proper box)
 - a. ☐ by personal service. I personally delivered the documents listed in item 2 to the party or person authorized to receive service of process for the party (1) on (date): (2) at (time):
 - b. ☐ by substituted service. On (date): at (time): I left the documents listed in item 2 with or in the presence of (name and title or relationship to person indicated in item 3):
 - (1) ☐ (business) a person at least 18 years of age apparently in charge at the office or usual place of business of the person to be served. I informed him or her of the general nature of the papers.
 - (2) ☐ (home) a competent member of the household (at least 18 years of age) at the dwelling house or usual place of abode of the party. I informed him or her of the general nature of the papers.
 - (3) ☐ (physical address unknown) a person at least 18 years of age apparently in charge at the usual mailing address of the person to be served, other than a United States Postal Service post office box. I informed him or her of the general nature of the papers.
 - (4) ☐ I thereafter mailed (by first-class, postage prepaid) copies of the documents to the person to be served at the place where the copies were left (Code Civ. Proc., § 415.20). I mailed the documents on (date): from (city): or ☐ a declaration of mailing is attached.
 - (5) ☐ I attach a declaration of diligence stating actions taken first to attempt personal service.

PLAINTIFF/PETITIONER: Kevin Burton	CASE NUMBER: M82071
DEFENDANT/RESPONDENT: CDCR, et al.	

5. c. ☒ by mail and acknowledgment of receipt of service. I mailed the documents listed in item 2 to the party, to the address shown in item 4, by first-class mail, postage prepaid,
- (1) on (date): 03/05/07 (2) from (city): West Sacramento
- (3) ☒ with two copies of the Notice and Acknowledgment of Receipt and a postage-paid return envelope addressed to me. (Attach completed Notice and Acknowledgment of Receipt.) (Code Civ. Proc., § 415.30.)
- (4) ☐ to an address outside California with return receipt requested. (Code Civ. Proc., § 415.40.)
- d. ☐ by other means (specify means of service and authorizing code section):

☐ Additional page describing service is attached.

6. The "Notice to the Person Served" (on the summons) was completed as follows:

- a. ☒ as an individual defendant.
- b. ☐ as the person sued under the fictitious name of (specify):
- c. ☐ as occupant.
- d. ☐ On behalf of (specify):

under the following Code of Civil Procedure section:

- | | |
|---|---|
| <input type="checkbox"/> 416.10 (corporation) | <input type="checkbox"/> 415.95 (business organization, form unknown) |
| <input type="checkbox"/> 416.20 (defunct corporation) | <input type="checkbox"/> 416.60 (minor) |
| <input type="checkbox"/> 416.30 (joint stock company/association) | <input type="checkbox"/> 416.70 (ward or conservatee) |
| <input type="checkbox"/> 416.40 (association or partnership) | <input type="checkbox"/> 416.90 (authorized person) |
| <input type="checkbox"/> 416.50 (public entity) | <input type="checkbox"/> 415.46 (occupant) |
| | <input type="checkbox"/> other: |

7. Person who served papers

- a. Name: Keith Chandler
- b. Address: 3960 Industrial Blvd., Suite 100, West Sacramento CA 95691
- c. Telephone number: 916-376-8738
- d. The fee for service was: \$
- e. I am:

- (1) ☒ not a registered California process server.
- (2) ☐ exempt from registration under Business and Professions Code section 22350(b).
- (3) ☐ registered California process server:
- (i) ☐ owner ☐ employee ☐ independent contractor.
- (ii) Registration No.:
- (iii) County:

8. ☒ I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

or

9. ☐ I am a California sheriff or marshal and I certify that the foregoing is true and correct.

Date: April 4, 2007

KEITH CHANDLER

(NAME OF PERSON WHO SERVED PAPERS/SHERIFF OR MARSHAL)


(SIGNATURE)

POS-015

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): Steven C. Sanders SBN 171369 Sanders & Associates 3960 Industrial Blvd., #100 West Sacramento, CA 95691 TELEPHONE NO.: 916-376-8738 FAX NO. (Optional): 916-376-8717 E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name): Kevin Burton	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Monterey STREET ADDRESS: 240 Church St., Suite 318 MAILING ADDRESS: CITY AND ZIP CODE: Salinas, CA 93901 BRANCH NAME:	
PLAINTIFF/PETITIONER: Kevin Burton DEFENDANT/RESPONDENT: CDCR, et al.	
NOTICE AND ACKNOWLEDGMENT OF RECEIPT—CIVIL	CASE NUMBER: M82071

TO (insert name of party being served): MTA Garcia

NOTICE

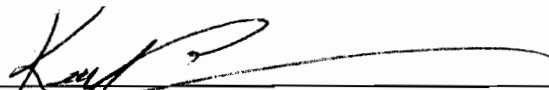
The summons and other documents identified below are being served pursuant to section 415.30 of the California Code of Civil Procedure. Your failure to complete this form and return it within 20 days from the date of mailing shown below may subject you (or the party on whose behalf you are being served) to liability for the payment of any expenses incurred in serving a summons on you in any other manner permitted by law.

If you are being served on behalf of a corporation, an unincorporated association (including a partnership), or other entity, this form must be signed by you in the name of such entity or by a person authorized to receive service of process on behalf of such entity. In all other cases, this form must be signed by you personally or by a person authorized by you to acknowledge receipt of summons. If you return this form to the sender, service of a summons is deemed complete on the day you sign the acknowledgment of receipt below.

Date of mailing: 3/5/07

Keith Chandler

(TYPE OR PRINT NAME)


 (SIGNATURE OF SENDER—MUST NOT BE A PARTY IN THIS CASE)

ACKNOWLEDGMENT OF RECEIPT

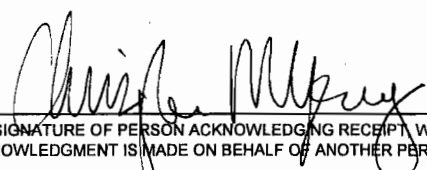
This acknowledges receipt of (to be completed by sender before mailing):

- ☒ A copy of the summons and of the complaint.
- ☒ Other: (specify): Case Management Notice

STATE OF CALIFORNIA
 OFFICE OF THE ATTORNEY GENERAL
 DEPARTMENT OF JUSTICE
 455 GOLDEN GATE AVENUE, SUITE 11000
 SAN FRANCISCO, CA 94102-3664

(To be completed by recipient):

Date this form is signed: 3/26/07
 (TYPE OR PRINT YOUR NAME AND NAME OF ENTITY, IF ANY,
 ON WHOSE BEHALF THIS FORM IS SIGNED)


 (SIGNATURE OF PERSON ACKNOWLEDGING RECEIPT, WITH TITLE IF
 ACKNOWLEDGMENT IS MADE ON BEHALF OF ANOTHER PERSON OR ENTITY)

Page 1 of 1

USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF Kevin Burton	COURT CASE NUMBER CV-07-4967 PJH (PR)
DEFENDANT California Department of Corrections, et al.	TYPE OF PROCESS Summons Order and Complaint

SERVE AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN Corrections Officer Silva
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) Salinas Valley State Prison, P.O. Box 1020, Soledad, CA 93960

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

Kevin Burton, C-38062
R.J. Donovan State Prison
P.O. Box 779007
San Diego, CA 92179

Number of process to be served with this Form 285

3

Number of parties to be served in this case

19

Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold **This Correctional Officer, was previously Issued (Served) SUMMONS Order and Complaint ON MARCH 26, 2007. AND AN Acknowledgment of Receipt was signed by person on behalf of another person. FILED IN STATE COURT WITH SAME DEFENDANTS AS present federal civil case ABOVE. Please see attached "Acknowledgment of Receipt."**

RECEIVED
UNITED STATES MARSHAL
FOLD
NORTHERN DISTRICT
OF CALIFORNIA
08 JUN 11 AM 10:12

Signature of Attorney other Originator requesting service on behalf of:

☒ PLAINTIFF☐ DEFENDANT

TELEPHONE NUMBER

415-522-2000

DATE

6/10/07

Felicia Reloba

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 11	District to Serve No. 11	Signature of Authorized USMS Deputy or Clerk R. Jones	Date 6/30/08
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I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion then residing in defendant's usual place of abode

Address (complete only different than shown above)

Date _____ Time _____
☐ am
☐ pm

Signature of U.S. Marshal or Deputy

Service Fee	Total Mileage Charges including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*) \$0.00
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REMARKS: **7/1/08 - contacted Lit. Coordinator @ SVSP****7/2/08 - two officers w/ same last name - need First & Last Name**

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): Steven C. Sanders Sanders & Associates 3960 Industrial Blvd., #100 3960 Industrial Blvd., Ste 100 West Sacramento, CA 95691 TELEPHONE NO.: (916) 376-8738 FAX NO. (Optional): 916-376-8738 E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name): Kevin Burton		FOR COURT USE ONLY FILED APR 16 2007 LISA M. GALDOS CLERK OF THE SUPERIOR COURT DEPUTY J. NICHOLSON
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Monterey STREET ADDRESS: 240 Church St., Suite 400 Monterey County Superior Court MAILING ADDRESS: 1200 Agujito Road CITY AND ZIP CODE: Salinas, CA 93901 Monterey, Ca 93940 BRANCH NAME:		
PLAINTIFF/PETITIONER: Kevin Burton DEFENDANT/RESPONDENT: CDCR, et al.		CASE NUMBER: M82071
PROOF OF SERVICE OF SUMMONS		Ref. No. or File No.:

(Separate proof of service is required for each party served.)

1. At the time of service I was at least 18 years of age and not a party to this action.
2. I served copies of:
 - a. ☒ summons
 - b. ☒ complaint
 - c. ☒ Alternative Dispute Resolution (ADR) package
 - d. ☐ Civil Case Cover Sheet (served in complex cases only)
 - e. ☐ cross-complaint
 - f. ☒ other (specify documents): Case Management Notice; Blank Request to Vacate or Continue Initial Case Management Conference and Order
3. a. Party served (specify name of party as shown on documents served): C/O Silva
 - b. ☐ Person (other than the party in item 3a) served on behalf of an entity or as an authorized agent (and not a person under item 5b on whom substituted service was made) (specify name and relationship to the party named in item 3a):
4. Address where the party was served: Department of Justice, 455 Golden Gate Avenue, Suite 11000, San Francisco, CA 94102-3664
5. I served the party (check proper box)
 - a. ☐ **by personal service.** I personally delivered the documents listed in item 2 to the party or person authorized to receive service of process for the party (1) on (date): _____ (2) at (time): _____
 - b. ☐ **by substituted service.** On (date): _____ at (time): _____ I left the documents listed in item 2 with or in the presence of (name and title or relationship to person indicated in item 3): _____
 - (1) ☐ **(business)** a person at least 18 years of age apparently in charge at the office or usual place of business of the person to be served. I informed him or her of the general nature of the papers.
 - (2) ☐ **(home)** a competent member of the household (at least 18 years of age) at the dwelling house or usual place of abode of the party. I informed him or her of the general nature of the papers.
 - (3) ☐ **(physical address unknown)** a person at least 18 years of age apparently in charge at the usual mailing address of the person to be served, other than a United States Postal Service post office box. I informed him or her of the general nature of the papers.
 - (4) ☐ I thereafter mailed (by first-class, postage prepaid) copies of the documents to the person to be served at the place where the copies were left (Code Civ. Proc., § 415.20). I mailed the documents on (date): _____ from (city): _____ or ☐ a declaration of mailing is attached.
 - (5) ☐ I attach a declaration of diligence stating actions taken first to attempt personal service.

PLAINTIFF/PETITIONER: Kevin Burton	CASE NUMBER: M82071
DEFENDANT/RESPONDENT: CDCR, et al.	

5. c. ☒ by mail and acknowledgment of receipt of service. I mailed the documents listed in item 2 to the party, to the address shown in item 4, by first-class mail, postage prepaid,
- (1) on (date): 03/05/07 (2) from (city): West Sacramento
- (3) ☒ with two copies of the *Notice and Acknowledgment of Receipt* and a postage-paid return envelope addressed to me. (*Attach completed Notice and Acknowledgement of Receipt.*) (Code Civ. Proc., § 415.30.)
- (4) ☐ to an address outside California with return receipt requested. (Code Civ. Proc., § 415.40.)
- d. ☐ by other means (specify means of service and authorizing code section):

☐ Additional page describing service is attached.

6. The "Notice to the Person Served" (on the summons) was completed as follows:

- a. ☒ as an individual defendant.
- b. ☐ as the person sued under the fictitious name of (specify):
- c. ☐ as occupant.
- d. ☐ On behalf of (specify):

under the following Code of Civil Procedure section:

- | | |
|---|---|
| <input type="checkbox"/> 416.10 (corporation) | <input type="checkbox"/> 415.95 (business organization, form unknown) |
| <input type="checkbox"/> 416.20 (defunct corporation) | <input type="checkbox"/> 416.60 (minor) |
| <input type="checkbox"/> 416.30 (joint stock company/association) | <input type="checkbox"/> 416.70 (ward or conservatee) |
| <input type="checkbox"/> 416.40 (association or partnership) | <input type="checkbox"/> 416.90 (authorized person) |
| <input type="checkbox"/> 416.50 (public entity) | <input type="checkbox"/> 415.46 (occupant) |
| | <input type="checkbox"/> other: |

7. Person who served papers

- a. Name: Keith Chandler
- b. Address: 3960 Industrial Blvd., Suite 100, West Sacramento CA 95691
- c. Telephone number: 916-376-8738
- d. The fee for service was: \$
- e. I am:

- (1) ☒ not a registered California process server.
- (2) ☐ exempt from registration under Business and Professions Code section 22350(b).
- (3) ☐ registered California process server:
- (i) ☐ owner ☐ employee ☐ independent contractor.
- (ii) Registration No.:
- (iii) County:

8. ☒ I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
- or

9. ☐ I am a California sheriff or marshal and I certify that the foregoing is true and correct.

Date: April 4, 2007

KEITH CHANDLER
(NAME OF PERSON WHO SERVED PAPERS/SHERIFF OR MARSHAL)


(SIGNATURE)

POS-015

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): Steven C. Sanders SBN 171369 Sanders & Associates 3960 Industrial Blvd., #100 West Sacramento, CA 95691 TELEPHONE NO.: 916-376-8738 FAX NO. (Optional): 916-376-8717 E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name): Kevin Burton		FOR COURT USE ONLY FILED APR 16 2007 LISA M. GALDOS CLERK OF THE SUPERIOR COURT DEPUTY J. NICHOLSON
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Monterey STREET ADDRESS: 240 Church St., Suite 318 MAILING ADDRESS: Monterey County Superior Court 1200 Agujito Road CITY AND ZIP CODE: Salinas, CA 93901 Monterey, Ca 93940 BRANCH NAME:		
PLAINTIFF/PETITIONER: Kevin Burton DEFENDANT/RESPONDENT: CDCR, et al.		
NOTICE AND ACKNOWLEDGMENT OF RECEIPT—CIVIL		CASE NUMBER: M82071

TO (insert name of party being served): C/O Silva

NOTICE

The summons and other documents identified below are being served pursuant to section 415.30 of the California Code of Civil Procedure. Your failure to complete this form and return it within 20 days from the date of mailing shown below may subject you (or the party on whose behalf you are being served) to liability for the payment of any expenses incurred in serving a summons on you in any other manner permitted by law.

If you are being served on behalf of a corporation, an unincorporated association (including a partnership), or other entity, this form must be signed by you in the name of such entity or by a person authorized to receive service of process on behalf of such entity. In all other cases, this form must be signed by you personally or by a person authorized by you to acknowledge receipt of summons. If you return this form to the sender, service of a summons is deemed complete on the day you sign the acknowledgment of receipt below.

Date of mailing: 3/5/07

Keith Chandler

(TYPE OR PRINT NAME)

(SIGNATURE OF SENDER—MUST NOT BE A PARTY IN THIS CASE)

ACKNOWLEDGMENT OF RECEIPT

This acknowledges receipt of (to be completed by sender before mailing):

- ☒ A copy of the summons and of the complaint.
- ☒ Other: (specify): Case Management Notice
STATE OF CALIFORNIA

OFFICE OF THE ATTORNEY GENERAL

DEPARTMENT OF JUSTICE

455 GOLDEN GATE AVENUE, SUITE 11000

SAN FRANCISCO, CA 94102-3664

(To be completed by recipient):

Date this form is signed: 3/26/07

(TYPE OR PRINT YOUR NAME AND NAME OF ENTITY, IF ANY,
ON WHOSE BEHALF THIS FORM IS SIGNED)(SIGNATURE OF PERSON ACKNOWLEDGING RECEIPT, WITH TITLE IF
ACKNOWLEDGMENT IS MADE ON BEHALF OF ANOTHER PERSON OR ENTITY)

Page 1 of 1

U.S. Department of Justice

United States Marshals Service
Northern District of California

450 Golden Gate Ave., Room 20-6888
San Francisco, CA 94102

Official Business
Penalty for Private Use \$300

Civil Case # CV07-04967
Buckner v. CDC, et al
Attn: Felicia Renteria

RECEIVED
U.S. DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA
AUG 22 10 3:21 AM